

Enter and View

Report
Delves Court Care Home
Carried out 24th October 2017



Local voices
improving local
health and social care



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Part of the Healthwatch Walsall remit is to carry out Enter and View Visits. Healthwatch Walsall Authorised Representatives, will carry out these visits to health and social care premises to find out how they are being run, and make recommendations where there are areas for improvement.

The Health and Social Care Act, allows Authorised Representatives to observe service delivery and talk to service users, their families, and carers on premises. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about, and share examples of what they do well, from the perspective of people who experience the service first hand.

Healthwatch Walsall Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Walsall safeguarding policy, the service manager will be informed and the visit will end. The Local Authority Safeguarding Team will also be informed.



Provider Details

Name: Delves Court Care Home

Address: 2 Walstead Road

Walsall

WS5 4NZ

Service Type: Elderly residential care

Date of Visit: 24/10/17

Authorised Representatives

Name: Ross Nicklin **Role:** Healthwatch Walsall Advisory Board

Name: Tom Collins **Role:** Community Outreach Officer,(HWW)

Name: Ashley Lovell **Role:** Observer, (HWW)

Purpose of Visit

- To observe the physical environment of the home and the interactions of staff and residents
- To listen to, observe and capture the experiences of service delivery from the residents, relatives and staff
- The reason for the announced visit was that, due to a change of ownership, there hadn't been a CQC inspection under the new incumbents
- It should be noted however, that under the previous ownership the CQC inspection rated the home as good in November 2016

Physical Environment

External

The exterior of the building was well maintained with off road parking to the side. There is CCTV to the exterior of the building. Entry to the home was via a buzzer and intercom system.

Internal

Visitors are requested to sign in; however, consideration should be given by management/owners, to providing a visitor/contractor signing in book which both meets legislative requirements and imparts the relevant health and safety information at the point of signing.

This would include a tear off identification pass facilitating and indicating authorisation to be on site.

Off the main reception area were the management and administration offices and also access to the kitchen.

The reception area displayed the obligatory documentation, such as the certificate of employer's liability insurance, copy of the CQC registration and information relating to the fire procedures for the building.

Also on display was feedback data relating to service provision, a compliments folder, a 'you said, we did' board and the current food menu.

In addition, there was an activity board for that specific day, detailing balloon tennis for the morning and a church service for the afternoon.

There was also a folder containing photographs of residents enjoying various activities.

Hand sanitisers and call bells are accessible in all areas.

The resident rooms are arranged over 3 floors accessed by stairs and a lift, each having a communal area.

There is a nurse's station and treatment room containing medication on each floor.

There is also a room which acts as a hairdresser.

Due to the change of ownership, the home is presently under a program of refurbishment throughout. The ground floor has been completed to a very high standard, but as yet, is not occupied. Furniture is new, comfortable and is arranged to encourage interaction between residents.

Even though the refurbishment is still to be completed, the other areas of the home are also extremely well presented and clean. The decor seems to be well maintained and areas of traffic appear to be free from clutter making it safe for residents to move around. All areas are bright and airy.

Following individual resident and management permission, we were able to speak to some service users in their own rooms. All of these were clean and well appointed and personal effects were much in evidence.

There are televisions in each of the communal areas.

There is a communal garden area which was not being used on the day of our visit.

Generally, the garden area was adequate with sensory aids and bird feeders in evidence, however there was evidence of some litter.

Resident Numbers

Capacity is 62, however at present, due to the refurbishment program there are only 41 residents.

Staff Numbers

There are presently 64, including 7 domestic, 1 maintenance, 2 administrations, 2 managements, 2 activity coordinators and 4 catering.

The remainder are carers and nursing staff, arranged over day and night cover.

Turnover

Currently the staffing levels are over prescribed, however the owners have decided to maintain existing numbers in advance of bringing the home up to full capacity once the refurbishment has been completed.

The owners and management should be applauded for this approach.

Agency Usage

Not applicable at the time of our visit due to above.

Resident Experiences and Observations

We managed to speak to 5 residents who were able to share their experiences. The feedback received was entirely positive.

Residents told us that their personal choices in respect of dress, food and drink, bedtime and personal care were always respected.

For example, one lady liked to watch TV until late at night. She also liked to eat 'spicy' food at times; both of these personal choices were recognised by staff.

We were also told that residents felt able to speak readily to staff regarding their individual needs and that they were responsive to their requests.

This is translated into individual care plans; which relatives are asked to contribute to. One resident was able to tell us of her medication regime which she confirmed was always provided in a timely fashion. All of the residents we spoke to felt safe and free from risk. They were aware there was scope to raise concerns or complaints with staff, although none had cause to do so.

The residents appeared to be well looked after. The attention to personal care was much in evidence; one gentleman told us he was shaved daily if he wished and one lady said staff would plaid her hair if she couldn't manage it. We were also told there were regular visits from the chiropodist.

The residents we spoke to confirmed that they were treated with dignity and respect. One lady told us that when she was being washed and changed, the door was closed to maintain privacy. She also said that the process was carried out safely and a hoist was used to facilitate this. In addition, there was positive feedback regarding the interaction of the staff with residents; one lady told us they were frequently checking on her to see if she was ok.

We were told that the staff were polite and used resident first names in conversations.

Religious preferences are respected and one resident confirmed that the local priest visits him and his visiting wife.

All of the residents we spoke to understood how to use the call bell which was easily accessible within individual rooms.

Service users seemed to be aware of activities available to them although not all choose to participate. Shopping trips and carvery meals were cited as examples from choices on lists provided. However, there was also evidence of individual activity; one resident told us about one to one opportunities and another was contributing to the Halloween and Christmas celebrations by making decorations.

We were told that external outings are arranged and accompanied, whilst special events are celebrated.

One lady told us she would be accompanied to a relative's funeral by a staff member.

Access to external professional care such as the GP is possible, although most of the residents we spoke to take advantage of healthcare visits to the home.

Overall, all of the residents we spoke to felt happy within the environment.

Two items were raised for potential consideration by management. Wheelchair access at tables could be improved to facilitate more than one at a time. Also, a private area away from rooms and communal areas to meet with visitors would be beneficial, with perhaps a coffee machine in situ.

Family and Carer Experiences and Observations

We were able to speak to 2 family members on the day of our visit. They were also positive regarding their experiences.

They were made to feel welcome in the home and able to visit at any time.

They felt they were kept informed regarding the relative at all times and involved in the care process and able to take part in meetings with staff.

In both instances the relatives confirmed that they felt the resident was safe, well cared for and treated with respect and dignity.

They also confirmed that any concerns that they might have would be considered and acted upon.

In addition, they were positive regarding the physical environment and the facilities provided.

They thought that the standard of food was very good and they were extremely praiseworthy of the staff and how they interacted with residents.

Activities

There was a strong focus on activities in the home, both on an individual and group basis facilitated by dedicated activity coordinators.

The residents we spoke to were aware of the activities available, but also felt that they had a choice in their level of participation.

In addition, the residents that we observed taking part in the group activity seemed to be enjoying themselves and interacting not only with staff but other individuals.

The activities folder we looked at with photographs of previous events recorded residents interacting with others in a wide variety of group situations.

Catering Services

The current food hygiene rating is 3 which means generally satisfactory.

Notwithstanding this, the residents we spoke to were happy with both the quality and choice of meals provided.

Kitchen preparation areas were clean and food storage was well laid out. There is a varied choice of menu which is changed regularly and individual documented dietary needs are catered for. There is an understanding of nutritional requirements and soft/puréed meals are provided.

Meals can be taken either at the designated meal time or at resident request.

Regrettably, due to the timing of our visit we did not see a food service.

Staff Experiences and Observations

On the day of our visit we managed to speak to 4 staff members, including the home manager, the clinical lead nurse, senior carer and chef.

The current management have been in position since early 2017. This followed the change of ownership to the Select Healthcare Group.

There is a strong emphasis on staff training and development within the home. We were told that e learning is used actively and that staff are able to progress their roles and acquire new skills accordingly. There is a training matrix to cover all employees.

Recruitment carries a high priority to include DBS checks and a focus on NVQ accreditation. There is a resident forum, (Your Voice), which facilitates service user input on staff recruitment.

The senior carer told us that there is an open culture in which staff concerns can be raised with management, both unofficially and through the assessment process. Her experience of working at Delves Court was extremely positive.

She talked to us about the detailed handover process and its importance when linked to individual resident care plans.

The clinical lead nurse stressed the importance of assessing risk within care plans and focusing on individual activities by using the 'my life story' process.

She also told us that there were procedures in place to ensure timely and effective control of medication ensuring there were no gaps in distribution to service users. This was confirmed by one of the residents in a later discussion.

We were shown the quality assurance system by the manager and she confirmed that the clinical lead nurse and herself were responsible for carrying out mandatory audits. We saw evidence of recent audits being carried out.

We saw evidence that concerns are documented and are followed up with remedial actions put in place.

The home manager told us about a number of initiatives being used to improve resident experiences and care. One example of this was the 'life story' documentation which provides an easy read approach to the holistic care of individual residents.

Another was the possibility of introducing photographed food images to help residents make meal choices.

There is a strong focus on dignity; for example, through the admissions process, during which new residents are allocated an individual coordinator to ensure that choices such as nutritional needs and personal hygiene are maintained in a period of change.

We were also told by management that they encourage and facilitate visits by healthcare professionals into the home, such as GP's and the triage nurse. They assist with the development of resident care plans, which helps to reduce external hospital visits.

We observed a number of staff and resident interactions during our visit. One group of residents were engaged in a memory activity in one of the communal areas with a member of staff. They were being encouraged to share memories with each other. This activity was conducted in a caring and respectful manner.

In addition, we saw lifting equipment being used safely with two members of staff in attendance.

Staff used first names when speaking to residents and addressed them in a caring and friendly manner.

Summary, Comments and Further Observations

All of the feedback received was extremely positive. On a number of occasions, we were told that this was the best home some of the residents/relatives had experienced.

The home is putting the residents at the centre of the service provision, not least in taking an innovative approach to care, for example through the easy read life story documentation being used.

The management have also been influential in the collaborative design of the Visitor Guide for Walsall Borough nursing homes under the auspices of the NHS sponsored SPACE project.

With the permission of the management of Delves Court, we will publish this guide on our website.

We thank the residents, relatives, staff, management and owners for their cooperation and contributions during our visit.

Recommendations and Follow Up Action

- Arrange follow up visit once home achieves full occupancy.
- Tear off identification pass facilitating and indicating authorisation for visitors and contractors to be on site.
- Wheelchair access at tables could be improved to facilitate more than one at a time.
- Private area away from rooms and communal areas to meet with visitors would be beneficial.
- Develop a plan to achieve a 5 star food rating to provide confidence in the standard of food hygiene.

Provider Feedback

Feedback is important to us, as is the care and well-being of all of our residents. We take great pride in ensuring we deliver high-quality care and facilities to make a difference to our residents and their families lives. We are continually reviewing our service provision.

The catering team have been working alongside residents to improve upon the meal time experience, this includes more home cooked food and purchasing of new equipment, with more robust monitoring of systems taking place.

DISCLAIMER

Please note that this report only relates to findings we observe on the specific date of our visit. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time.



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